## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO. 1015 75 06 9 APPLICANT(S)

FILING DATE

(FOR USE WITH FORM PTO-875)

16	CLAIMS														
	AS FILED		AFTER I*AMENDMENT		AFTER 2 ** AMENDMENT				AS FILED		AFTER 1"AMENDMENT		AFTER  2 ** AMENDMENT		
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TOTAL CLAIMS	15		1000					TOTAL CLAIMS							
PTO - 1360	TO - 1369 (REV. 11/04) U.S. DEPART											TMENT of COMMERCE rademark Office			